					04	_ 82	2	313	>
PATENT APPLICA EI	TION FEE D			ORD	الم	•		Dock 1 Nu	
CLAIMS	AS FILED -		(Column 2)		MALL			OTHE	R THAN
TOTAL CLAIMS	1	17			RATE	FEE	RO F		ENTITY
FOR	NUMBER	FILED	NUMBER EXTRA	1	IASIC FE		OR	RATE	710 00
TOTAL CHARGEABLE CLAIM	s 67 mir	us 20= °	.457	11	XS 9-	-			
INDEPENDENT CLASMS	L/ mi	nus 3'=	/	1 H	X40=	-	OR		846.
MULTIPLE DEPENDENT CLAS	M PRESENT		П	1 F	7400		OR	X80=	80:
* If the difference in column 1 is less than zero, enter "O" in column 2					+135-		OR	+270=	
11		•		•	TOTAL		OR	TOTAL	1436:
(Column	S AMENDED 1)	(Column	2) (Column 3	2 . 1	SMALL	ENTITY	OR	OTHER SMALL	THAN
COUNTS REMAININ AFTER AMENOME Total Independent		NUMBE PREVIOU PAID FO	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE -	ADDI- TIONAL FEE
Total ·	14	1-(/	. =	1 6	X\$ 2_		OR	X\$18=	
Independent • (May fine	حي	• •		X40=		ОЯ	X00=	
FIRST PRESENTATION OF	MULTIPLE DEP	ENDENT C	LAM .	J F	-				
	•••	•	•	, L	135= 107/L		OR	+270= TOTAL	
(Column		(0.1	a) .a	_	OFFEE		OR	MOOIT FEE	
CLAIMS	3	(Column HIGHES HUMBE PREVIOUS	R PRESENT SLY EXTRA	1	TATE	ADDI- TIONAL		RATE	ADDI- TIONAL
AFTER AMENDAES Total - 6 Independent - 6	Miram	PAID FO	7	lŀ.	_	FEE			FEE
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X40- 170 OR 2505 176									176
				•	135-	V	OR	+270=	
3/2/-				ADC	TOTAL NI. FEE		OR ,	TUTAL DOIT, FEE	
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Total - 76.	Minus	-61	- 9		3 9=		OR	X\$18=	FEE 150.00
Independent • '7	Minus	••• 6	- /	 -	40-		· t		
PRIST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							OR	700°	200·02
" If the only in column 1 is less than the only in column 2, write "O" in column 3,					35=	·	OR	+270=	
"If the "Highest Number Proviously Paid For" by THES SPACE is less than 30, order "20." ADDIT, FEEOR ADDIT, FEEOR ADDIT, FEEOR ADDIT, FEE									
The Trighest Number Previously	Paid for (July or L	ndependent)	is the highest number	t found b	1 th appr	opriade box	يئون دا	ma t.	

FORM PTO-E

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*U.S. (\$70) \$80 488 70870100